## NEW YORK STATE BAR ASSOCIATION

#### **MEETING REGISTRATION FORM**

#### PERSONAL INFORMATION

Name(s)		
Firm		
Address		
City	State Zip _	
Phone ( )		
Email		
First Time Attendee 📮		
FEES Attorney Registration Fe		\$195.00
Non-Member Attorney		
Attorneys Admitted Un	der Five Years:	\$95.00
Law Student Rate:  (Registration Fee Includes contine favors, programming and costs a		
PAYMENT INFORMA  Check or money order  New York State Bar As  Charge \$	enclosed. (Mak ssociation) to 🚨 America	
☐ Discover ☐ MasterCa	rd Uisa	
Expiration date		
Card number:		
Authorized Signature		

# Health Law Section Fall Meeting October 25, 2013

State Bar Center One Elk Street Albany



Please note any address corrections on the left.

### Registration fee includes:

Continental breakfast, coffee breaks, cocktail reception, favors, programming and costs associated with program materials.

#### **Cancellation Notice:**

Notice of cancellation must be received by **October 18, 2013** in order to obtain a refund for registration fees.

# Fax or mail this form with registration fee(s) to:

Department of Section Services One Elk Street

Albany, New York 12207 Phone: 518-487-5681 Fax: 518-463-5993 Attn: Lisa Bataille

